

ADOLESCENTS' ADJUSTMENT ON THE BASIS OF GENDER AND LOCALE

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ABSTRACT

Adolescence is the most crucial stage of human life. The present investigation was attempted to find out the influence of gender and locale and their interaction on adjustment and its dimensions in adolescents. The sample comprised of 214 adolescents randomly drawn from urban and rural areas of Rohtak. Data were analyzed by using 2×2 factorial design. Results showed a significant influence of gender on adolescents' health, emotional, social and overall adjustment. A significant influence of locale on home adjustment and social adjustment was also observed. Further, results reflect a significant interactive influence of gender and locale on health and emotional adjustment in adolescents. The findings of the study show that girls were higher on over all adjustment and emotional adjustment and boys were higher on health and social adjustment further; urban adolescents were higher on home adjustment and social adjustment than rural adolescents. Whereas rural adolescents were higher on over all adjustment. These findings are of paramount importance for parents, teachers, psychologists, counsellors, researchers, health policy-makers and school administrators to comprehend the impact of gender and locale on adjustment in adolescents. Delimitations of the study and suggestions for future researches have also been discussed.

KEYWORDS: Adolescents' Adjustment on the Basis of Gender and Locale

INTRODUCTION

Adolescence a term derived from the *Latin word, adolescere*, which means "to grow up". It is a transitional stage of physical and psychological human development that generally occurs during the period from puberty to legal adulthood. Basically, the term adolescence means, "to emerge" or "achiever identity", which is a relatively new concept, especially in rational thinking. The period of adolescence is most closely associated with the teenage years. This period is renowned as Golden period of life, but contrary at the same time, as the period of stress and storm. Adolescence is a phase of development in which transformation and growth is an ongoing process (Adams, 2005). This is the period of growth spurt where maximum changes can be observed in an individual as compared to the other phases of life and as stated by Broderick & Metz (2009) adolescents is a distinct group with their own unique needs and concerns.

Of all the phases in the developmental trajectory, adjustment of adolescence period captures the spotlight. Sometimes, adolescents, particularly when they coincide with the transition to physique and phycology, can be a phase of experimentation, emotional turmoil, doubt, and apprehension. At this time young adolescents may show signs of increased pessimism in their outlook, exhibit more challenging behaviour, and display a declining interest in school (Carnegie Council on Adolescent Development, 1989; Roeser & Eccles, 1998). But at the same time, the experiences youth have may transform and reveal them as individuals with the prospective to engage in critical independent thinking, the ability to learn, and the capacity to hold themselves accountable for their actions (Roeser, & Eccles, 1998). At adolescent stage, children are faced with new challenges due to onset of puberty but at the same time they start enjoying greater autonomy,

fewer restrictions, and more options at a stage when they require supervision and fostering. Adolescents are expected to strive to make mature relations with age mates, learn to perform appropriate gender roles, ascertain autonomy, prepare for economic independence, make decisions on intimate relationships, and aspire to be responsible in community and to develop a set of values or morals (Louis & Emmison, 2012). To accomplish these expectations, is tedious task, but most adolescents experience smooth transitioning provided; they get the emotional support as well as the required encouragement from the family as well as determine largely what one will be as a person and as an adult. Irrefutably, with support, many youth are able to successfully navigate through this crucial transitional phase. However, many may not experience positive adjustment when their psychological and physical well-being is eroded away due to the many challenges youth experience (Carnegie Council on Adolescent Development, 1995).

Adolescents account for about 1/5th of India's population (Anon, 2004). Recent researches suggest that more young people are beginning to report of severe stress, as they are facing complex realities of life. It is estimated that seven to nine million children and adolescents in the United States have adjustment or behavioural problems. Vawda, (2002), reported in his findings that 69.56 per cent of adolescents had suicidal behaviour due to parent-child problems, about 17.39 per cent due to partner relational problems, 8.69 per cent due to adjustment disorders and 4.35 per cent of children due to depression. Adolescents in disadvantaged communities are at elevated risk for exposure to multiple stressors, indicating high rates of crime and victimization, family poverty, family conflict, increased prevalence of deviant peers and school with inadequate resources (Gonzales et al., 2001).

Adjustment, therefore, has been considered as an index to integration; a harmonious behaviour of the individual by which other individuals of the society recognize the person as well adjusted (Pathak, 1990). Adjustment, in psychology, refers to the behavioural process by which humans and other animals maintain equilibrium among their various needs or between their needs and the obstacles of their environments. Berkowitz, Battistich & Bier (2008) stated that adjustment is a process of altering behaviour to reach a harmonious relationship with the environment. It is a process of change and search by an individual for some level of balance or acceptance with the environment, others, or oneself. Compatible with a developmental perspective, adolescents who undergo unfavourable adjustment in adulthood appear to have had problems across several areas earlier in development (Farmer et al., 2006; Wentzel, Caldwell, & Barry 2004). In contrast, adolescents, even individuals from deprived conditions, who experience productive outcomes in adulthood, tend to have exhibited many social, behavioural, and academic competencies in adolescence (Farmer et al., 2006; Luthar, Cicchetti, & Becker, 2000).

REVIEW OF RELATED LITERATURE

Some existing research on adolescents has identified a number of significant factors associated with adjustment. These include demographic (Kumar R., 2014), personality such as level of self-esteem (David, 1992), individual differences (Ellis, 2002), Socio-metric status (Wentzel, (2003).), well-being (Singh, 2009), social competencies (Brown, 2006), mental health, (Tinnfalt, 2008). Furthermore, low level of adjustment has been associated with major negative consequences in adolescent's behaviour. These include poor mental health associated with violence (Patel et. al, 2007), hyperactivity associated with conduct problem (Muñoz et al, 2008), disruptive and aggressive behaviour (Hinshaw, 1987). Whereas, teachers' support helps in transitional phase of students' academic, personal, and interpersonal functioning (Barber & Olsen, 2004). Peer relationships have the potential to promote both social and cognitive development, both of which are crucial to positive adjustment (Diehl et al., 1998). Theoretically, the peer relations that children experience

influence their adjustment; from a developmental perspective, individuals develop diverse needs that can be satisfied by distinctive social interactions at the different phases of development (Erdley, Nangle, Newman, & Carpenter, 2001). Gurubasappa (2005) significant difference in the academic achievement of students with different levels of adjustment and mental ability related to gender, type of school, and medium of instruction, locality and socio-economic status.

SIGNIFICANCE OF STUDY

Adjustment is a process that supports in keeping the balance between need and the capacity and helps to lead a happy and well contented life. It persuades to change the way of life according to the demands of the situation. Adjustment gives strength and ability to bring desirable changes in the conditions of our environment. In an adolescent's life, adjustment is of utmost importance to reach harmony with the environment. It has been found that adolescents' social and behavioural problems, emotional disturbances, and academic difficulties are highly interrelated and contribute to each other during development. Protective and coping resources that are provided in the culture, including extensive family involvement, support and monitoring systems in school, and regulatory peer group and social networks, may effectively buffer negative effects of adolescent social, school, and psychological difficulties, particularly of an externalizing nature (Chen et. al, 2000). This paper elucidates children's emotional and behavioural problems in the environment by studying adolescents' adjustment and investigates the consequences of different dimensions of adjustment affecting children on the basis of gender and locale.

The present research aimed to study the adolescents' adjustment on the basis of gender and locale. In the present study, the term adjustment includes home, health, social and emotional aspects of adolescents. Gender and locale are an important aspects for investigation while looking adjustment in adolescents. Therefore, gender and locale have been examined in combination in the present study so that a concerted and articulated action can be evolved on the basis of gender and locale to improve the adjustment of adolescents.

OBJECTIVE

To study the main influence of gender and locale and their interactive influence on adjustment and its different dimensions in adolescents

HYPOTHESIS

There is no significant influence of gender and locale and their interactive influence on adjustment and its dimensions in adolescents.

DESIGN

A 2×2 factorial design with unequal numbers was used in the present study.

SAMPLE

The sample for the present study comprised of 214 adolescents with age ranging from 12 to 19 years studying in grade IX to XII in government schools of rural and urban area of Rohtak. Stratified random sampling technique was used to collect the sample. Total sample was divided into groups (Gender – boys and girls, Locale – urban and rural) at each level according to the design of the study.

Table 1: Shows Description of the Sample

Gender	Locale		Total
	Urban	Rural	
Boys	53	51	104
Girls	57	53	110
Total	110	104	214

TOOL

The level of adjustment in adolescents was measured by Bell's adjustment inventory adopted by Ojha (1999). The scale is meant for students from High School to postgraduate classes. It measures adjustment on the lines of Bell's adjustment inventory in the areas of home, health, social and emotional. The inventory consisted of 160 questions, 32 in each of the five areas. Each item is prefixed by one of the five letters— a, b, c, d, e corresponding to the area to which the item belongs. The subjects are asked to give their responses in terms of “yes” or “No”, or “?”. Occupational adjustment area was dropped as it was not applicable to school students.

PROCEDURE

Stratified random sampling technique was applied for the selection of schools. The investigator contacted to the principals and explained the purpose and relevance of the study individually and obtained the consent from school authorities. Copies of Adjustment inventory were distributed among adolescent participants. Before administering the research instrument, rapport was established. The investigator requested the participants to fill the questionnaire honestly and accurately. The instructions were written on the front page of the inventory. The investigator communicated in Hindi and English languages whenever necessary. The subjects were assured that the present questionnaires were meant for the research purposes and would not affect them in any way. Thus, the data were collected and analysed using the statistical technique.

STATISTICAL ANALYSIS

Two-way analysis of variance was applied to study two levels of gender (boys and girls) and two levels of locale (urban and rural). Descriptive statistics were also computed. Partial eta square method was used to calculate the effect size.

RESULTS AND DISCUSSIONS

Table 2 shows descriptive analysis for the constructs used in the study.

Table 2: Mean and SD Scores Signifying Gender and Locale for Adjustment and its Dimensions

Adjustment & its Dimensions	Gender	Locale			
		Urban		Rural	
		M	SD	M	SD
Adjustment	Boys	45.26	14.94	41.08	12.68
	Girls	55.34	18.07	50.02	19.76
Home	Boys	19.23	4.76	9.78	4.57
	Girls	12.86	5.65	10.63	7.11
Health	Boys	9.77	5.29	10.37	3.91
	Girls	13.34	5.84	10.58	6.42
Social	Boys	12.23	5.43	11.37	3.85

	Girls	14.79	5.45	14.42	6.06
Emotional	Boys	11.70	5.31	9.55	4.62
	Girls	18.02	5.25	14.29	6.98

Table 3: Summary of ANOVA for 2×2 Factorial Design for Adjustment and its Dimensions in Adolescents on the Basis of Gender and Locale

Adjustment & its Dimensions	Source of Variance								
	Gender			Locale			Gender × Locate		
	F	P-Value	Partial η^2	F	P-Value	Partial η^2	F	P-Value	Partial η^2
Adjustment	16.86**	.000	.074	4.21**	.040	.022	.061	.806	.000
Home	2.61	.107	.012	5.96**	.018	.026	.261	.610	.001
Health	6.36**	.012	.029	2.10	.149	.010	5.06**	.025	.024
Social	15.12**	.000	.007	7.18**	.010	.033	.112	.738	.001
Emotional	8.28**	.004	.038	.234	.128	.011	6.91**	.000	.070

**F.95 (1,336) = 3.86

The data were subjected to two-way ANOVA and results revealed a significant main influence of gender on adjustment in adolescents, $F (1, 336) = 16.86$, $P < .05$ (partial eta 2 = .074) indicating that girls ($M = 54.60$, $SD = 16.24$) were higher on adjustment than boys ($M = 46.03$, $SD = 9.13$). It can be seen from the table 3 that mere 7.4% of the variance was accounted for main influence of gender on the level of adjustment in adolescents. This result is in cohesion with previous finding (Paramanikl, Saha & Mondal., 2014) indicating that the girls are better adjusted as compared to their boys' counterpart. Kaur (2012) found that girls have more adjustment power than boys.

The ANOVA on the locale on adjustment in adolescents came out to be significant, $F (1, 336) = 4.21$, $P < .05$ (partial eta 2 = .022) indicating that girls of rural area ($M = 1.12$, $SD = 17.3$) showed higher level of adjustment than the girls of urban area ($M = 49.78$, $SD = 10.37$) and their other counterparts. Results clearly show a mere 2.2% of the variance was accounted for influence of Locale on adjustment in adolescents. On the basis of current finding it may be inferred that despite belonging to rural background, the girls of rural area are more adjusting to the surroundings than urban girls. Yellaiah (2012) found significant difference on the basis of residence, whereas the finding of Kaur (2012) revealed that locality does not influence adjustment power.

Table 3 revealed a significant main influence of locale on home adjustment in adolescents, $F (1, 336) = 5.96$, $P < .05$ (partial eta 2 = .026) indicating that urban adolescents ($M = 12.36$, $SD = 6.39$) were higher on home adjustment than rural adolescents ($M = 9.78$, $SD = 4.56$). It can be seen from the table 3 that a mere 2.6 % of the variance was accounted for main influence of locale on home adjustment in adolescents. The result is in line with the earlier researches (Roy and Mitra, 2012 & Yellaiah, 2012) that adolescents differ significantly on the basis of locality.

Table 3 revealed a significant main influence of gender on health adjustment in adolescents, $F (1, 336) = 6.36$, $P < .05$ (partial eta 2 = .029) indicating that boys ($M = 12.79$, $SD = 6.45$) were higher on health adjustment than girls ($M = 9.35$, $SD = 4.76$). A mere 2.9% of the variance was accounted for main influence of gender on health adjustment in adolescents. The present finding is consistent with the results of Singh (2006) who found that boys were significantly better than girls in their health adjustment. In another study, Roy and Mitra (2012) examined the pattern of adjustment among early and late adolescent school students and revealed that early and late adolescents group differed significantly from each other in the, health adjustment. These results are congruous with the finding of the present investigation.

The ANOVA on the first order interactive influence of gender and locale on health adjustment of adolescents came out to be significant, $F(1, 336) = 5.06$, $P < .05$ (partial eta $^2 = .024$) indicating that girls of rural area ($M = 11.75$, $SD = 6.95$) showed higher health than girls of urban area ($M = 9.49$, $SD = 5.70$) and their other counterparts. A mere 2.4% of the variance was accounted for interactive influence of gender \times locale on health adjustment in adolescents. It may be due to the fact that in urban areas the life style is hectic and full of chaos. Everybody is in hurry due to fast technological bombardment whereas rural adolescents generally have better nutritional status than adolescents in urban area as they receive organic and natural contents in their meals and are more near to natural environment and spend quality time in their families. The present finding is contrary with the findings of Kaur (2012), Parmar (2014) and Paramanikl, Saha & Mondal., (2014).

Further, Table 3 demonstrates the significant influence of gender on social adjustment in adolescents, $F(1, 336) = 15.12$, $P < .05$ (partial eta $^2 = .007$) indicating that boys ($M = 14.42$, $SD = 6.06$) were higher on social adjustment than girls ($M = 11.37$, $SD = 3.85$). A mere 0.7% of the variance was accounted for main influence of gender on social adjustment in adolescents. The present finding is consistent with Roy and Mitra (2012) finding that social adjustment differs in sexes. Whereas in another study, Velmurugan and Balakrishnan (2011) indicated that social adjustment is independent upon gender.

A significant main influence of locale on social adjustment of adolescents, $F(1, 336) = 7.18$, $P < .05$ (partial eta $^2 = .033$) was also found indicating that urban adolescents ($M = 14.85$, $SD = 5.76$) were higher on social adjustment than rural adolescents ($M = 11.81$, $SD = 5.14$). It can be seen from the table 3 that a mere 3.3% of the variance was accounted for main influence of locale on emotional well-being in adolescents. The result is in contrary with the earlier research (Velmurugan and Balakrishnan, 2011) revealed that social adjustment is independent upon locality.

Table 3 showed a significant main influence of gender on emotional adjustment of adolescents, $F(1, 336) = 8.28$, $P < .05$ (partial eta $^2 = .038$) indicating that girls ($M = 14.70$, $SD = 6.98$) were higher on emotional adjustment than boys ($M = 13.39$, $SD = 4.27$). It can be seen from the table 3 that a mere 3.8% of the variance was accounted for main influence of gender on emotional adjustment of adolescents. This finding is contrary with previous findings of Kasinath (1990) and Pradhan (1993) that boys are significantly better adjusted than girls on the basis of emotions. Raju and Rahamtulla (2007) also revealed that boys have better emotional adjustment as compared to girls, have control on their anger whenever things are not happening according to their wish. In another study Kaur and Kaur (2007) found that the boys and girls do not differ in their emotional competence.

It can be inferred from the table 3 that interactive influence of gender and locale on emotional adjustment of adolescents came out to be significant, $F(1, 336) = 6.91$, $P < .05$ (partial eta $^2 = .070$) indicating that girls of urban area ($M = 69.40$, $SD = 6.95$) showed higher emotional adjustment than girls of rural area ($M = 65.99$, $SD = 9.40$) and their other counterparts. A mere 7% of the variance was accounted for interactive influence of gender \times locale on emotional adjustment of adolescents. It may be due to the fact that urban girls receive more exposure to different aspects of life. The parents residing in urban areas are educated and try to understand the peculiarities of this stage by giving attention to the needs of their wards. These children have more opportunity for self-expression and they are more socially active in real world as well as virtual world. This kind of support raises their emotional balance and enhances the level of emotional adjustment. Paliwal, Kishore and Badola (2011) found that highest adequate depth of feeling was found in female students from rural locality, adequate expression and control and function with emotion in female students from urban locality and

enhancement of positive emotions in male students of urban students.

IMPLICATIONS AND DELIMITATIONS

The purpose of this study was to reconnoitre the influence of gender and locale on adjustment among adolescents. Adolescents' are highly prone to get being influenced by the emotions. It has been seen that conflicts in family, unbalanced nutrition, separated father and mother, extreme protection and punishment, lack of proper sexual education and hormonal changes are responsible for the stress among the adolescents affecting their adjustment level. It is rightly indicated that the most part of the turbulent of adolescents is associated with stressful event, so, remedial measures and support system should be provided to them for their well-round development. Thus, the findings have important implications in understanding the different dimensions of adjustment of adolescents, i.e. related to health, home, emotional or social level, providing a base to parents, teachers, counsellors and researcher to deal with adolescents 'in a better manner.

The present study has certain delimitations. The study was confined to 214 adolescents drawn from government schools of urban and rural area. Indian adolescent population is one of the biggest in the world, so in future the sample size must be fairly large. This study was confined to sample of adolescents having two demographic variables namely gender and locale. A similar study can be conducted on a large sample to study the behaviour pattern among the adolescents and adults. The present study was carried out on government schools. A similar study may be conducted on samples drawn from semi-government and public schools located in metropolitan areas and results may be opted by comparison and validation. It will also be sagacious to conduct some follow-up, longitudinal, comparative or experimental studies to measure the adjustment at different levels e.g. school level, college level and university level. Some studies covering level of adjustment and its influence on level of aspiration, moral values, personality, intelligence, general and professional qualification etc. among the adolescents could be undertaken.

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